Kent W. Abernathy, Commissioner

### REQUEST FOR SPECIAL IDENTIFICATION NUMBER (HIN)

Title Application Checklist

Special Identification Number applications for a watercraft are processed by BMV Central Office Title Processing to improve the security and efficiency of these transactions. Prior to submitting each application, verify all required information is included. Contact (888) 692-6841 with any questions.

When submitting paperwork, include the following:

	51 1
	Application for Special Identification Number Motor Vehicle or Watercraft – State Form 12907
	Proof of Ownership. Examples include: Certificate of Title, Certificate of Origin, Bill of Sale, etc. If no proof of ownership, submit the <u>Watercraft Ownership Affidavit – State Form 55100</u> .
	<u>Physical Inspection of a Vehicle or Watercraft – State Form 39530</u> . Must be completed by a law enforcement officer.
	One original side view, color picture of the entire watercraft.
	\$10.50 for hull identification number (HIN) application. Payable MasterCard or Visa, check, electronic check, or money order.
	r convenience, the required forms are included with this checklist. The forms are also available at <a href="https://com">/.com</a> . Mail the completed packet to:
	Central Office Title Processing 100 North Senate Avenue, Room N417 Indianapolis, IN 46204
	include this checklist and contact information with your application. If all required ents are not submitted or information is incomplete, the entire application will be ed.
Print N	ame
Phone	Number Fmail (ontional)



## APPLICATION FOR SPECIAL IDENTIFICATION NUMBER – MOTOR VEHICLE OR WATERCRAFT

State Form 12907 (R5 / 10-12) INDIANA BUREAU OF MOTOR VEHICLES BUREAU OF MOTOR VEHICLES 100 North Senate Avenue, N417 Indianapolis, IN 46204

**INSTRUCTIONS:** 

- 1. Complete in blue or black ink or print form.
- 2. Proof of ownership for vehicle or watercraft and/or parts must be submitted with the application.
- 3. VIN inspection, State Form 39530, must be completed by a law enforcement officer and submitted with the application.
- 4.Include a side view, color photograph of the entire vehicle or watercraft. For manufactured homes a photograph of the front and back of the home is required.

APPLICA	ANT INFO	RMATIO	N			
Name (last, first, middle initial or company name)				Driver's Licen	se or Feder	al Identification Number
Address (number and street)		City			State	ZIP Code
, radios (rango and area)		0,			J. C.	
VEHICLE OR WA	TERCRAI	T INFO	RMATION			
Original Identification Number (include any numbers that remain or "none")			Year	Make		Model
Vehicle or Watercraft Type License Plate or Watercr	aft Registration	n Number	(if known)	Length (for waterc	raft, ft/in)	
From whom purchased (if applicable):  Name						
realite						
Address (number and street)		City			State	ZIP Code
Reason for request:						
Identification Number not installed Explain reason no	t installed					
☐ Identification Number altered or defaced Explain cause of a	alteration or de	efacement				
☐ Privately Assembled Motor Vehicle			Privately	Assembled Wa	tercraft	
PRIVATELY ASSEMBI Check the major component p						
☐ Engine/Motor			Transmis	ssion		
☐ Body Chassis			Front As	sembly		
☐ Rear Clip			Frame			
Other (please specify):	,					
This application is submitted to request the Bureau of Moto watercraft described above. I certify that the above vehicle and safety standards.						
I swear or affirm that the information that I have entered on constitute the crime of perjury.	this form	is corre	ct. I unde	rstand that ma	king a fa	lse statement may
Signature	Printed Nar	ne				Date Signed (mm/dd/yyyy)



### WATERCRAFT OWNERSHIP AFFIDAVIT

State Form 55100 (9-12) Indiana Bureau of Motor Vehicles

INSTRUCTIONS:

- 1.
- Complete in blue or black ink or print form.

  An applicant who is unable to present ownership documentation for a watercraft due to one of the reasons listed below may present this form to obtain a certificate of title and/or certificate of registration.

  All applicants claiming ownership must sign this affidavit.
- 3.

								OW	NER INF	ORMA	HON										
Owner	r's Name	(last, f	ïrst, mide	dle initia	l or com	pany	name)														
Owner	r's Legal	Addres	s (numb	per and	street)				City					Stat	te	ZIP Code					
Owner	r's Name	(last, f	ïrst, mide	dle initia	l or com	pany	name)														
			<u>.                                    </u>																		
Owne	r's Legal	Addres	ss (numb	per and s	street)				City					Stat	te	ZIP Code					
							W	ATE	RCRAFT	INFOR	MATIO	N									
Hull lo	dentifica	ion Nu	ımber (l	HIN): (pi	lease en	ter in	spaces be	elow)		1		Make			Year						
Model	Name a	nd/or N	lumber				Length (fe	eet an	d inches)		1	Horsep	ower	ı							
		Hul	l Materia	al			Boat Type	e					Propulsion								
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		' '	Aluminur	ın [	☐ Wood	'	☐ Runab	oui	☐ Airboa	ıı	□ Ну	aroioii	☐ Outboard		☐ Auxilia	ry Saii					
		🗆 '	Fiberglas	ss [	Plasti	С	Sailbo	at	☐ Comm	ercial	□ Ну	droplane	☐ Inboard		☐ Water	Jet					
	heck ropriate		Steel	[	Other		☐ Pontod	on	☐ Cruise	r	☐ Jet	-Ski	☐ Sail		☐ Manua	l 🔲 Other					
	оргіасе Вох						☐ Housel	boat	☐ Hover	craft	☐ Uti	lity			Fuel	04					
							☐ Yacht		☐ Amphi	bious	☐ Otl	ner	Gasoline		Diesel	Other					
		Wat	tercraft	Use												_					
			Pleasure	)	☐ Fish	ing		] Live	ry	☐ Pa	assenge	r for Hire	☐ Com	mercia	al						
			Watercra	aft Value	ed at Les	s Tha	an \$3,000 '	When	n New			Dat	e of Purchase o	r Date	of Assembl	y (mm/dd/yyyy)					
_	heck		Watercra	aft Purch	nased Pr	ior to	January 1	, 198	6			Pur	chase Price								
	ropriate eason		Privately				•	,				\$									
		' '	riivaleiy	Assemi	bieu wa	leicia	iit					Est \$	Estimated Value When New (required for registration)								
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Regis	stration.	I agre	e to inc	demnify	and ho	ld ha	armless tl	he In		eau of	Motor \	/ehicles	Certificate of Term any liabile.								
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Printe	d Name o	of Owne	er				Si	gnatu	re of Owne	er			1	Date S	Signed (mn	n/dd/yyyy)					
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Visit ID	)											d ( <i>mm/d</i> a	Vyyyy)								

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#### PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R5 / 12-11) Approved by State Board of Accounts, 2011 INDIANA BUREAU OF MOTOR VEHICLES

**INSTRUCTIONS:** 

- 1. Approved inspector must complete information in blue or black ink or print form.
- 2. The vehicle identification number (VIN) or hull identification number (HIN) must be inspected to verify the existence and condition of the number. An ownership document is not required to be submitted for inspection.
- 3. Inspections may be performed by an employee of a dealer designated by the Indiana Secretary of State, a military policeman assigned to a military post in Indiana, a police officer, or a designated employee of a BMV full or partial service license branch.
- Police officers completing this form may not charge a fee of more than \$5.00 for vehicles. No fee may be collected for watercraft inspections. Authorized Indiana dealers and BMV full or partial service license branches may not assess a fee.
- 5. Dealers may not perform watercraft inspections.

								OWN	IER	INFO	ORM	ATION									
Name (la	ast, first, r	niddle initial (	or compan	y name																	
Address	(number	and street)																			
City																State	•		ZIP	Code	
						VEI	HICLE (	OR W	/ATI	ERC	RAF	T INFO	RMATI	ON							
Identific	ation Num	nber												□ NO	NE (se	elect if	no i	identifica	ation n	number t	found)
Year		Make			Model				Тур	e			Plate Nu	ımber / Sta	ite			Watercr Number	aft Req	gistration olicable	
		ed vehicle	es or wa	itercra	ft inclu	de :	serial n	umb	ers 1	for n			onent p	arts if p	resen	t:					
Engine /	Motor										Trans	smission									
Body Ch	nassis										Front	t Assemb	ly								
Rear Cli	р										Fram	ie									
Other (s	pecify):																				
*IDAC	S / NCI	C Check	(require	d if fori	n is cor	nple	eted by a	a poli	ice o	ffice	r)										
Date Ch	eck Perfo	rmed ( <i>mm/d</i>	d/yyyy)	Comm	ents																
		irm that t			n I hav	e er	ntered c	n thi	is fo	rm i	s co	rrect.	unders	stand ma	aking	a fals	e si	tateme	nt m	ay	
Signatur	e of Inspe	ector					Printed	l Name	Э					Title					Da	ate (mm/c	dd/yyyy)
Badge /	Branch / [	Dealer Numb	er				Police	Depart	tment	/ Brar	nch / [	Dealershi	p	City					ZII	P Code	
Telepho	ne Numbe	er					Email /	Addres	s												
(	)																				



## Payment Information

	(MasterCard or Visa)
Electronic ch	reck
•	the Indiana Bureau of Motor Vehicles to charge the credit card indicated
below:	
Type of card:	☐ MasterCard ☐ Visa
Name of cardho	lder:
Account	
Number:	
Expiration	
Date:	